

Yeovil Rural District Council



ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR ENDED

31st DECEMBER, 1969

YEOVIL RURAL DISTRICT COUNCIL

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ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH

FOR THE YEAR ENDING 31ST DECEMBER 1969

PUBLIC HEALTH OFFICERS

Medical Officer of Health	:	P. POWER FOX, M.B., Ch.B., D.P.H.
Engineer & Surveyor	:	P.E. MITCHELL, C.Eng., M.I.Mun.E., A.M.I.W.P.C.
Chief Public Health Inspector	:	B. MORRIS, M.A.P.H.I.
Deputy Chief Public Health Inspector	:	J.T. DALLIMORE, M.A.P.H.I.
Additional Public Health Inspectors	:	W.G. KELLY, M.A.P.H.I. W.A. BARTON, M.A.P.H.I.
Authorised Meat Inspector	:	D.H. De GROOT



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TO THE
CHAIRMAN AND COUNCILLORS
 OF THE
YEOVIL RURAL DISTRICT COUNCIL

- 0000:0000 -

Ladies and Gentlemen,

I have the honour to present my Annual Report for the year 1969.

VITAL STATISTICS

Births

The total number of live births during the year was 527, as compared with 479 for the previous year. The Standardised Birth Rate was 17.3, as compared with 15.9 for the previous year. The Rate for England and Wales was 16.3.

Deaths

The total number of deaths was 278, 117 of this total occurring in people aged 75 years and over (42%). The Crude Rate per 1,000 population was 9.6, the corrected rate being 10.5. The Rate for England and Wales was 11.9.

As in previous years, the major causes of death were Heart Disease, 88, Vascular Lesions of the Nervous System (strokes) 47, and Cancer 53. With regard to Heart Disease, 67 deaths were ascribed to Ischaemic Heart Disease (Coronary Disease). Coronary Disease in general is thought of as a disease which attacks adults, mainly men, in the 35 - 55 age group, but with regard to men, 67.5 of the deaths occurred over the age of 65 years. Similarly, for women, of the 27 deaths, 74.0% occurred over the age of 65.

IMMUNIZATION

Members of the Council are aware that consequent upon the use of the Computer at County Hall, immunization of children, (pre-school and school), was removed from the Welfare and School Medical Service, and in previous reports I expressed disquiet at this measure. The system was introduced gradually and 1969 - 70 was the first year when 100% "Computer Immunization" was carried out in Yeovil Borough and Yeovil Rural Districts; the 100% target has not yet been reached in the Wincanton Rural District. Figures furnished by the County are in relation to those general practitioners whose surgeries are situated in the Local Authority areas and are therefore approximate figures, but the figures do indicate a satisfactory maintenance of the immunization level of children. Based on the combined birth rate of Yeovil Borough and Yeovil Rural District, the figures are as follows:-

	<u>Yeovil</u> <u>Borough</u>	<u>Yeovil</u> <u>R.D.</u>	<u>Total</u>	<u>Percentage</u> <u>Immunized</u>
No. of Births	377	527	904	
Immunization against Polio	565	436	1,001	110%
Immunization against Smallpox	539	313	812	89%
Immunization against Diphtheria	544	370	914	101%
Immunization against Tetanus	553	437	990	109%
Immunization against Whooping Cough	535	356	891	98%

FLUORIDATION

I first made reference to the value of fluoridation in my Annual Report for 1955, and in five subsequent reports I have again advocated this beneficial measure of rectifying a defect in the public water supply.

Opponents of fluoridation of public water supplies have urged the value of alternative methods. In a leading article in the British Medical Journal, April, 1970, "Control of Dental Caries", the following abstract is relevant.

"Adjustment of the content of fluoride ion in the drinking water to the optimum concentration of 1 p.p.m. has long been accepted by most authorities as a safe effective, and ethical method of reducing caries. Extensive studies in areas where the drinking water contains fluoride, either naturally or artificially, have contributed evidence of the value of the ion, and in addition it has been shown that the effect of fluoride is not confined to children but continues into middle age. A recently published report from the Department of Health has further confirmed previous findings, but it also showed that the 1962 decision by the local authority in Kilmarnock to discontinue fluoridation resulted in an increase in the caries experience of children, which is approaching the pre-fluoridation level.

"Other vehicles for the administration of fluoride have been considered, including salt, milk and tablets. All have drawbacks which render them unsuitable as part of a community health procedure. Local applications of fluoride in the form of solutions applied by means of mouth rinses and toothpastes have been subjected to clinical trial and shown to have some value. But the reductions in caries experience do not approach those resulting from water fluoridation. Thus, while caries cannot be described as an entirely preventable disease, its prevalence in the community and the harm to a particular individual can be reduced considerably by a sound diet and the use of fluorides."

In the journal "Medical Officer", dated 6th December, 1968, an article by the Federation Dentaire Internationale and Association Dentaire Mondiale, London, stated that in Hastings, New Zealand, payments from public funds for dental treatment have been halved after 10 years of fluoridation. The cost of dental care and treatment in Somerset for the year ending 31st March, 1969, was £968,500, approximately £165,975 being charged to patients.

The "Medical Officer", 27th March, 1970 (Parliament and Public Health) reported as follows:-

"Mr. Judd: Would my right hon. Friend agree that a number of L.A.'s throughout the country are making half-baked decisions on the basis of totally inadequate information? Would his Department give higher priority to making sure that proper and authentic information is available for L.A.'s when considering this vital subject?

Mr. Crossman: I suggest to my hon. Friend that, however much money, time and trouble one takes, eyes which are determinedly closed cannot be opened.

Mr. Fortescue: Is the right hon. Gentleman aware that practically every dentist is enthusiastically in favour of fluoridation in the interests of patients? Mr. Crossman: I am aware of that. I must admit that, while in respect of public education I am an old-fashioned Liberal, I am being gradually but inevitably driven to the view that we may have to legislate to deal with this problem."

NUTRITION IN THE ELDERLY

Social Factors in the Health and Nutrition of the Elderly.

Paper read to the Royal Society of Health, Food and Nutrition Group, London, 1969, by Malcolm Johnson, B.A., D.S.A.A.

A survey of the Health status, social and economic circumstances of 162 people over 70 in Camden L.B., in relationship to their facilities for sustaining an adequate diet showed 23% of single persons households spent less than £2 a week on food and 40% of two-person households, less than £4. 43% had refrigerators and 91% full cookers. The great majority had a hot meal daily, cooked by themselves. Only 4% had Meals on Wheels. Conclusions show that those who are older or live alone are not more vulnerable to conditions related to dietary deficiency. Other points brought to light in this survey showed 23% to have an iron deficiency anaemia. The conclusions drawn from this survey were limited by the absence of detailed information on diet, it was considered that in the sample of people surveyed inadequate nutrition was limited to a small minority. Three results were considered particularly interesting if not new.

1. Nutritional deficiencies did not in general increase with age.
2. Whilst anaemia was more common among women than men, there appeared to be no other unlimited deficiencies.
3. Old people who lived alone did not appear to suffer more nutritional deficiencies, to be less likely to eat regular hot meals or to ask for supplements to their diet from others.

In an article "Research on Ageing" (S. Ferguson Anderson, O.B.E., M.D., F.R.C.P. - text of talk to the Medical Research Council) it is stated that the number of old people in the U.K. is increasing; after 1975 the increase will be in the age group of 75 years and over, with women being more numerous than men. This article also emphasized that disease in old age is insidious in onset. Much of it is of a minor nature, but when minor lesions accumulate in the same patient, illnesses of a severe nature may ensue. Older people take up much more of the general practitioners time. In a 1955 - 56 study conducted by the General Register Office and the Royal College of General Practitioners men over 65 years of age required 586 more consultations and women 641, compared with 339 and 408 respectively at all ages. A comforting side light is that though attention to the elderly by relatives and friends is often said to be a declining figure (Zetterquest 1968) suggest that in the U.K. relatives and friends do much more than in other countries. 42% of old people in the U.K. live with one or more of their children, corresponding figures, the U.S.A., Denmark and Sweden are 28%, 20% and less than 10% respectively.

With regard to the authorities for whom I act as Medical Officer of Health, I am of the opinion that though the problem of old people is not as acute as in other parts of England and Wales, it is sufficiently large to merit more attention than it receives at present. The percentage of people aged 65 and over is approximately 15% of the general population - for the Yeovil Borough, 3,900; for Yeovil Rural District, 4,350 and for Wincanton Rural District, 2,500. It is self evident that the majority of these senior citizens are fit and healthy, but as previously shown they are a section of the community more liable to

illness than the general population. The total number of current cards held by Health Visitors attached to general practitioners, for the 1969 - 70 totalled 155, i.e. 3.3% of the 4,160 people aged 65 years and over, who are on the lists of the Yeovil general practitioners. Without minimising the value of infant welfare care, I think that if necessary some of these resources should be made available to the 65 years and over.

Other agencies which contribute greatly to the well-being of old people are:-

1. The Home Help Service

A report of the Government social survey on the Home Help Service in England and Wales, published April 1st, recommends that the existing force of 60,000 should be doubled or trebled to meet their commitments. The report states that 68% of the elderly helped were aged 75 years and over, more than 27% housebound, and only 11% without difficulty in performing tasks involving mobility; 10% had no surviving close relatives and most were adjudged to be living on or just above supplementary benefit level. Disquiet was expressed in the report that some 3% of elderly recipients of the service said that meals were never prepared by or for them, since this presumed that they were living exclusively on food that did not require cooking.

2. The Meals on Wheels Service

Meals on Wheels are supplied in the Yeovil Borough and Yeovil Rural District by the W.R.V.S., and by the Red Cross in the Wincanton Rural District. This service is not only of value in providing a hot meal, but is also of social value, especially to those old people living alone, who do not have much contact with the world. The main adverse criticisms are:-

- (i) The time interval between the preparation and serving of the meal, possibly 3 hours, and the loss of Vitamin C may amount to 90%.
- (ii) Due to lack of sufficient personnel the number of meals per person per week is inadequate.

Details of the meals supplied by the W.R.V.S. in the Yeovil Borough and Yeovil Rural District for the year 1969, are as follows:-

Yeovil Borough	No. of days per week on which meals are served	No. of recipients getting 1, 2, 3, 4, 5, 6 or 7 meals per week							Total mid-day meals served for the quarters
Quarters ended		1	2	3	4	5	6	7	
31.3.69	4	9	13	13					1,256
30.6.69	4	14	12	23					1,184
30.9.69	4	4	12	27					1,196
31.12.69	4	7	11	27					1,308
Total No. Meals									4,944

Comparative figures for the Yeovil Rural District are:-

Yeovil R.D.	No. of days per week on which meals are served	No. of recipients getting 1, 2, 3, 4, 5, 6 or 7 meals per week							Total mid-day meals served for the quarters
Quarters ended		1	2	3	4	5	6	7	
31.3.69	2		52						1,169
30.6.69	2		48						1,297
30.9.69	2		48						1,316
31.12.69	2		48						1,176
Total No. Meals									4,958

OBESITY

A feature of the "affluent society" is the increasing obesity of the population. The disadvantages of obesity are considerable, life expectancy is shortened, i.e. a man aged 45 who weighs 25 lbs. above his standard weight reduces his life expectancy by 25% and is more likely to die aged about 60 years than 80 years. The reasons for this are largely due to the strain on the heart due to overweight, high blood pressure and changes in the wall of the arteries. Other disabilities associated with obesity are arthritis, bronchitis, diabetes, gall stones and gout. It has been shown that 80% of fat children grow into fat adults, therefore, as prevention is better than cure, and as obesity in children

stems from overfeeding in infancy, it is the diet of babies and infants which requires reassessment. In 1967, I read an article in "World Medicine", headed "Infants Diet Shapes the Adult". I wrote to the Ministry of Health and received the following reply to various points I had raised, and in view of its importance I forwarded copies of the correspondence to General Practitioners and Health Visitors in the areas of which I am Medical Officer of Health, and to County Hall, etc., for their information.

(Copy of letter from the Ministry of Health, dated 10th October, 1967).

"You wrote some time ago concerning over-feeding in infancy and early childhood. Since then I have been seeking advice from various sources and can now comment as follows: There is indeed evidence from animal work that adipose tissue retains the capacity for forming new cells during early life. Professor Wolff refers to this in a chapter on "Obesity in Childhood" in Recent Advances in Paediatrics (1965), page 223. At present he knows of no similar work concerning the human species. The recent paper by P. Asher (Archives of Diseases of Childhood. 41.672.1966) shows that there is a tendency for the over-weight infant to grow into an over-weight child, and work which Professor Wolff did with his colleagues (Childhood Obesity: a long term study of height and weight, Lancet 2.145.1961) confirms that obesity during the school years is likely to persist into adolescence and into adult life. There seems no doubt that obesity is a common nutritional problem in children in this country. At present it would seem that there are still many doctors who are not aware of the dangers of obesity in infancy and childhood or of its bad prognosis. I understand that the B.M.A. is at present making a film on the subject of obesity in childhood and perhaps this will go a little way to publicizing the problem. I think it is one to which we should give further thought". Dr. F. Riley, Senior Medical Officer."

A comparatively recent innovation has been the introduction of solid foods into a baby's diet at an increasingly early age. Well known firms marketing cereals for the babies, suggest varying ages for the introduction of such foods, one firm suggesting a few days to a few weeks of age.

The "Medical Officer", May, 1970, published an article "Relationship between Weight of an Infant and Lower Respiratory Infections". Part of the findings were

- (i) Babies who received solids under 9 weeks of age had a significant increase in the number of infections, compared with those who had solids later than 9 weeks.
- (ii) Infants who were artificially fed had a higher proportion of lower respiratory infections in the first 9 months than those who were breast fed.
- (iii) Stroud (1968) drew attention to the fact that infants were moving to a solid diet at an early age and this had an important effect on obesity in infancy.

The British Medical Journal, 25.4.70., discussing Coeliac Disease (Malabsorption of fat, carbohydrates and minerals) points out that the symptoms of this disease will not occur whilst the baby is entirely milk fed, since the symptoms are the result of sensitivity

to the gluten fraction of wheat and rye protein, subsequent on the introduction of cereals into the diet. The article discusses the possible causes of this disease, and states "early exposure to gluten might be one of them, though there is no definite evidence that this is so". This article also emphasizes that excessive carbohydrate diet causes obesity in childhood which may be the precursor of childhood and adult obesity.

To clarify "early exposure to gluten, etc.," I wrote to the Editor of the British Medical Journal, and received the following reply -

"My own view is that the best time to introduce cereals is between 3 and 5 months of age (12 to 22 weeks). There is a certain amount of controversy about this, and it would be putting the point too strongly to talk in terms of "safety" or "danger". My reasons for recommending the time I do are:

1. Milk and vitamin supplements alone provide an adequate and balanced diet for infants up to the age of around 5 months. There is therefore no need to add anything else.
2. Doctors should be paying increasing concern to the prevention of obesity, with all its physical and social handicaps and its association with increased morbidity and mortality. There is increasing evidence that overfeeding and obesity in infancy, far from being harmless, are the precursors of obesity in later life. For some evidence on this, see E.E. Eid, British Medical Journal, April 11th, 1970, p.74, and the leading article in the same issue "The Overweight Child, p.64). If this is so, family doctors, those in infant welfare clinics, and health visitors - who advise on infant feeding - may have a special responsibility in the prevention of obesity. Infant cereals consist largely of carbohydrate; when cereals are introduced into the diet it will therefore contain a higher proportion of carbohydrate. Excess carbohydrate in the diet will be laid down as fat. The baby who is started on cereals before 3 months will not necessarily become obese, but my experience is that he is more likely to do so. After cereals are introduced at 3 - 5 months, those who advise on feeding should see that weight gain is not excessive. We need to spread the idea that plumpness is not necessarily a sign of health in babyhood.

"There are a number of other arguments which might possibly be taken into account in discussing the optimum time for introducing cereals, but none of these materially affects the 3 - 5 month recommendation. Prevention of obesity is the factor which concerns me most. I think it is right to point out that not all paediatricians would make the same recommendations on infant feeding, but I think it is also fair to say that there is an increasing weight of paediatric opinion agreeing with the point of view which I have set out."

It is common fallacy that fatness once established is due to gluttony. In fat persons the food intake is often not raised above the normal, but what has been established is that fat people exercise less and move more slowly. Obese patients were found to do fourteen, and none obese, thirty miles per week, so that in effect they are under-expending energy relative to intake.

As in previous Annual Reports, I should like to record my appreciation of the help and co-operation received from the Council, from the Public Health Committee and from the members of the Staff.

I have the honour to be,
Your obedient servant,

P. POWER FOX.
Medical Officer of Health.

YEOVIL RURAL DISTRICT

STATISTICS OF THE AREA FOR THE YEAR 1969

Area (in acres)	..	..	..	..	..	..	53,382
Rateable Value	..	..	..	..	..	..	£816,650
Estimated Produce of 1d. rate	...	..	..	..	..	..	£3,275
No. of inhabited houses	..	..	..	..	..	..	9,136
Population	..	..	..	..	..	..	28,980

PHYSICAL FEATURES AND SOCIAL CONDITIONS

The Yeovil Rural District, comprising an area of 53,382 acres, is situated in the South-East area of the County of Somerset and is composed of 31 Rural Parishes. The area in general is not very much above sea level; the greatest point of elevation being Ham Hill, 426 feet above sea level.

WATER SUPPLY

The water supply during the year has been satisfactory, the impounding reservoir at Sutton Bingham having been completed in December, 1955. The capacity of the reservoir is 575 million gallons, with an estimated net yield of 2.4 million gallons per day.

METEOROLOGY

The climate is mild and relaxing. There is little fog or mist.

RAINFALL

The rainfall for the year 1969, as recorded at Sutton Bingham Reservoir was 30.21 inches (35.15 in 1968).

OCCUPATION

The main industry of the district is agriculture, which is chiefly of a dairying and grazing nature. In addition, the manufacture of gloves is an important industry, glove factories being located at Martock, Stoke-sub-Hamdon and Tintinhull, in addition to the glove making which is carried out in the homes. A considerable proportion of people resident in the Yeovil Rural District are employed in the Yeovil Borough.

HOSPITAL SERVICES

The Hospital Services are mainly situated in the Yeovil Borough. The South Petherton Hospital, which deals with infectious diseases, is situated in the Rural District. The Hospital Services are administered by the South Somerset Hospitals Management Committee, under the general direction of the South Western Regional Hospital Board. Situated in the Yeovil Borough are:

- (1) Yeovil & District Hospital - an acute general hospital
- (2) Yeovil Hospital Maternity Unit - 50 beds
- (3) Summerlands Hospital - mainly used as a geriatric hospital

I am indebted to the Medical Records Officer for the following details for the year 1969.

		<u>Yeovil General Hospital</u>	<u>Yeovil Hospital Maternity Unit</u>
No. of in-patient discharges	...	3,591	1,281
No. of new Consultant Out-patients	...	6,774	376
New and old Consultant Out-patients		28,729	1,809
Available Beds	...	92	50
Orthoptic Dept., Attendances	...	1,812	-
Radiological Dept., units of work	...	38,257	-
Casualty Dept. Attendances	...	12,934	-
Births in Hospital	...	-	1,068
Attendances at Midwives Clinics	...	-	4,047

INFECTIOUS DISEASES

Cases of infectious diseases requiring hospital treatment, are treated at South Petherton Hospital (50 beds). In general, only the Cubicle Block is required (10 beds), and the other 40 beds are utilized for post-operative cases, so relieving the strain on Yeovil Hospital, and for General Practitioner patients and semi-chronic sick.

TUBERCULOSIS

A Chest Clinic is held on Mondays and Wednesdays at Yeovil Hospital. Patients requiring in-patient treatment are admitted to the Cheddon Road Hospital, Taunton.

LABORATORY SERVICE

A Laboratory is located at Yeovil Hospital, which deals with a large proportion of the pathological work connected with the hospital and the surrounding area. An emergency service is maintained, which deals primarily with the Yeovil Hospital blood bank. The larger Laboratory at Musgrove Park Hospital undertakes work beyond the scope of Yeovil Hospital. Also, the Public Health Laboratory Service has a Laboratory in Taunton, at which bacteriological examination of swab, blood, sputum and faeces is carried out. Bacteriological and chemical analyses for the examination of milk, food, water supplies and sewage effluent are also carried out.

AMBULANCE FACILITIES

The Ambulance Service is the responsibility of the Somerset County Council. The ambulance station, which was opened in 1963, has ample garage accommodation for the ambulances, with underfloor heating, a heated blanket store adjacent to the vehicles, a well equipped workshop for maintenance and repairs of a minor nature, a sluice for bottles and bed pans, and also a dressing destructor. The large control overlooks the station yard, and from here a constant supply of messages to and from the ambulances on the road is kept up, by the use of short wave radio.

HOUSING

I am indebted to the Housing Manager for the following information:-

Houses, etc., completed during the year ended 31.12.69	...	16
Houses, etc., erected post-war	...	1,227
Houses, etc., sold post-war	...	Nil.
Houses, etc., erected by the Local Authority		
and still owned by them	...	2,148
No. of applicants on the waiting list	...	538

VITAL STATISTICS OF THE YEAR

The statistics furnished by the Registrar General shows the number of births and deaths after correction has been made for transfers to the normal place of residence of the individuals concerned. From these figures can be calculated the "crude" birth and death rates. As, however, the highest mortality occurs at the two extremes of life, and industrial areas in general have a larger proportion of people living in the middle age periods of life, some correction must be made for the irregularities of distribution as regards age and sex, as otherwise the death rate will afford no accurate means of comparing the healthiness of one district with another. This comparability factor is furnished by the Registrar General, and applied to the "crude" birth or death rate, gives a standardised rate and enables comparison to be made with the rate for England and Wales or with rates of other districts.

	Local Authority Area			England & Wales
	Males	Females	Total	
Estimated mid-year home population	-	-	28,980	48,826,800
<u>Live Births</u>	279	248	527	797,542
Legitimate	270	238	508	730,500
Illegitimate	9	10	19	67,042
<u>Stillbirths</u>	6	6	12	10,662
Legitimate	6	5	11	9,555
Illegitimate	-	1	1	1,107
<u>Total live & still births</u>	285	254	539	808,204
Legitimate	276	243	519	740,055
Illegitimate	9	11	20	68,149
<u>Deaths of Infants, under 1 year of age</u>	5	5	10	14,397
Legitimate	5	5	10	12,694
Illegitimate	-	-	-	1,703

continued

	Males	Females	Total	England & Wales
<u>Under 4 weeks of age</u>	4	3	7	9,603
Legitimate	4	3	7	8,494
Illegitimate	-	-	-	1,109
<u>Under 1 week of age</u>	3	2	5	8,232
Legitimate	3	2	5	7,266
Illegitimate	-	-	-	966
<u>Deaths, all ages</u>	144	134	278	579,463

	Local Authority Area	England & Wales
<u>LIVE BIRTH RATES, ETC.</u>		
Livebirths per 1,000 home population (crude rate)	18.2	16.3
Area Comparability factor	.95	1.00
Local Adjusted Rate	17.3	16.3
Ratio of Local Adjusted Rate to National Rate	1.06	1.00
Illegitimate live births as percentage of all live births	4	8
<u>Stillbirth Rate</u>		
Stillbirths per 1,000 total live & still births	22	13
<u>Infant Mortality Rates</u>		
Deaths under 1 year per 1,000 live births	19	18
Deaths of legitimate infants under 1 year per 1,000 legitimate live births	20	17
Deaths of illegitimate infants under 1 year per 1,000 illegitimate live births	-	25
<u>Neonatal Mortality Rate</u>		
Deaths under 4 weeks per 1,000 live births	13	12
<u>Early Neonatal Mortality Rate</u>		
Deaths under 1 week per 1,000 total live births	9	10
<u>Perinatal Mortality Rate</u>		
Stillbirths and deaths under 1 week combined, per 1,000 total live & still births	32	23
<u>DEATH RATES, ETC., ALL AGES</u>		
Deaths per 1,000 population (crude rate)	9.6	11.9
Area comparability factor	1.09	1.00
Local Adjusted rate	10.5	11.9
Ratio of Local Adjusted Rate to National Rate	.88	1.00

MATERNAL MORTALITY

There were no maternal deaths during the year 1969.

BIRTH RATES

The table below shows the birth rates for the previous ten years.

1959	1960	1961	1962	1963	1964	1965	1966	1967	1968	1969
18.6	17.09	17.9	17.8	17.3	17.6	18.1	16.4	16.8	16.8	18.2
The adjusted birth rate = 17.3										

INFANTILE MORTALITY

The number of children dying within the first twelve months of life was 10, as compared with 3 for the previous year. The rate per 1,000 live births was 19, as compared with England and Wales, 18. The following table shows the number of deaths, and the Infantile Mortality Rate as compared with previous years.

	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968	1969
No. of deaths	12	10	5	5	11	7	4	6	4	3	10
Rate per 1,000 live births in Rural Dist.	25.6	22.7	10.7	10.5	23.6	13.8	7.7	12.0	7.8	8.3	19
Rate per 1,000 live births in Eng. & Wales	22.6	21.9	21.4	20.7	22.3	20.0	19.0	18.9	18.3	18	18

CAUSES OF DEATH AND AGE

	Under 4 weeks	4 weeks and under 1 year
Birth Injury ...	2	-
Pneumonia ...	1	-
Other Causes of Perinatal Mortality ...	4	-
Enteritis and other Diarrhoeal Diseases	-	1
Other infective and Parasitic Diseases	-	2
Total	7	3

The following table shows the causes of death, and age and sex incidence, and it will be noted that amongst the males, of the 144 deaths, 62 occurred between the ages of 65 and 75, and 43 occurred over the age of 75 years. Of the females, of the total of 134 deaths, 24 occurred between the ages of 65 and 75, and 74 occurred over the age of 75 years.

	Sex Total Under 4 weeks																					
	All		4		& under 1-		5-		15-		25-		35-		45-		55-		65-		75+	
	Ages		weeks		1 year																	
Enteritis and Other Diarrhoeal Dis.	M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	F	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other infective and parasitic Dis.	M.	2	-	-	-	1	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-
	F	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Malignant Neoplasm, Buccal Cavity, etc.	M	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2
	F	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Malignant Neoplasm, Stomach	M	4	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	3	-	-	1
	F	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-
Malignant Neoplasm, Intestine	M	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
	F	3	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	2
Malignant Neoplasm, Lung, Bronchus	M	13	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	4	6	-	3
	F	5	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	2	-	-	2
Malignant Neoplasm, Breast	M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	F	4	-	-	-	-	-	-	-	-	-	-	-	1	1	1	1	1	1	-	-	-
Malignant Neoplasm, Uterus	F	2	-	-	-	-	-	-	-	-	-	-	-	-	2	1	1	1	1	1	1	-
Malignant Neoplasm, Prostate	M	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	1
Leukaemia	M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	F	2	-	-	-	-	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other Malignant Neoplasms	M	6	-	-	-	-	-	-	-	-	-	-	-	-	2	1	1	3	3	1	1	4
	F	6	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	1	1	-
Benign and Unspecified Neoplasms	M	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Diabetes Mellitis	M	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
	F	4	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	2
Other Endocrine etc., Diseases	M	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-
	F	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

continued.....

	Sex	Total Under 4 weeks											
		All	4 weeks	& under 1 year	1-5	5-15	15-25	25-35	35-45	45-55	55-65	65-75+	
Other Disease of Nervous System, etc.	M	3	-	-	-	-	-	-	-	-	1	2	-
	F	1	-	-	-	-	-	-	-	-	-	-	1
Chronic Rheumatic Heart Disease	M	2	-	-	-	-	-	-	-	-	1	1	-
	F	-	-	-	-	-	-	-	-	-	-	-	-
Hypertensive Disease	M	5	-	-	-	-	-	-	-	1	1	-	2
	F	2	-	-	-	-	-	-	-	-	1	-	-
Ischaemic Heart Disease	M	40	-	-	-	-	-	-	-	1	4	8	16
	F	27	-	-	-	-	-	-	-	-	3	4	5
Other forms of Heart Disease	M	6	-	-	-	-	-	-	-	-	-	2	12
	F	15	-	-	-	-	-	-	-	-	1	-	4
Cerebrovascular Disease	M	18	-	-	-	-	-	-	-	-	1	11	6
	F	29	-	-	-	-	-	-	-	-	1	2	21
Other Diseases of Circulatory System	M	6	-	-	-	-	-	-	1	-	-	1	4
	F	1	-	-	-	-	-	-	-	-	-	-	5
Influenza	M	1	-	-	-	-	-	-	-	-	1	-	-
	F	1	-	-	-	-	-	-	-	-	-	1	-
Tracheitis	M	7	1	-	-	-	-	-	-	-	-	2	4
	F	5	-	-	-	-	-	-	-	-	-	1	4
Bronchitis and Emphysema	M	7	-	-	-	-	-	-	-	-	-	5	2
	F	2	-	-	-	-	-	-	-	-	-	-	1
Other Diseases of Respiratory System	M	-	-	-	-	-	-	-	-	-	-	-	-
	F	3	-	-	-	-	-	-	-	-	1	1	-
Peptic Ulcer	M	3	-	-	-	-	-	-	-	-	-	2	1
	F	-	-	-	-	-	-	-	-	-	-	-	-
Appendicitis	M	-	-	-	-	-	-	-	-	-	-	-	-
	F	1	-	-	-	-	-	-	-	-	-	1	-
Other Diseases of Digestive System	M	1	-	-	-	-	-	-	-	-	-	1	-
	F	4	-	-	-	-	-	-	-	-	1	-	2

continued.....

	Total									
	Sex	Ages		Total						
	All	4	weeks	1-5	15-25	35-45	55-65	75+		
Nephritis and Nephrosis										
	M	1	-	-	-	-	-	1	-	-
	F	-	-	-	-	-	-	-	-	-
Other Diseases, Genito-Urinary System	M	1	-	-	-	-	-	-	-	-
	F	1	-	-	-	-	-	1	-	-
Diseases of Musculo-Skeletal System	M	-	-	-	-	-	-	-	-	-
	F	2	-	-	-	-	-	2	-	-
Birth Injury, Difficult Labour, etc.	M	2	2	-	-	-	-	-	-	-
	F	-	-	-	-	-	-	-	-	-
Other causes of Perinatal Mortality	M	1	1	-	-	-	-	-	-	-
	F	3	3	-	-	-	-	-	-	-
Symptoms and Ill-defined Conditions	M	1	-	-	-	-	-	-	-	1
	F	-	-	-	-	-	-	-	-	-
Motor Vehicle Accidents	M	3	-	-	-	2	-	1	-	-
	F	-	-	-	-	-	-	-	-	-
All Other Accidents	M	1	-	-	-	1	-	-	-	2
	F	2	-	-	-	-	-	-	-	-
Suicide and Self-Inflicted Injuries	M	1	-	-	-	-	-	-	-	-
	F	-	-	-	-	-	-	-	-	-
All Other External Causes	M	1	-	-	-	-	-	1	-	-
	F	-	-	-	-	-	-	-	-	-
TOTAL, ALL CAUSES	M	144	4	1	-	3	-	3	9	43
	F	134	3	2	1	1	-	2	9	74

CANCER

The number of deaths due to Cancer (all forms) was 58. The table as set out below shows the incidence of Cancer for previous years.

1959	1960	1961	1962	1963	1964	1965	1966	1967	1968	1969
62	52	45	42	40	43	46	57	67	49	58

CANCER DEATH RATE PER 1,000 POPULATION

	1959	1960	1961	1962	1963	1964	1965	1966	1967	1968	1969
Yeovil R.D.	2.4	2.02	1.7	1.5	1.4	1.5	1.6	1.9	2.3	1.7	2.0
County of Somerset	2.12	2.15	2.22	2.17	2.17	2.31	2.2	2.23	2.28	2.33	2.38
England & Wales	2.13	2.15	2.16	2.17	2.1	2.21	2.2	3.3	2.27	2.51	2.35

INFECTIOUS DISEASES NOTIFIED

The following table sets out the details of infectious diseases notified during the year, and also the figures for the previous year.

	Cases Notified	
	1969	1968
Measles ...	240	29
Scarlet Fever ...	5	14
Whooping Cough ...	2	2
Dysentery ...	-	1
Tuberculosis, Pulmonary ...	1	3
Tuberculosis, Non-pulmonary ...	-	1
Food Poisoning ...	-	2
Infective Hepatitis ...	1	-
Acute Encephalitis ...	1	-
Total ...	250	52

TUBERCULOSIS

The number of cases of Pulmonary Tuberculosis notified was 1, Non-pulmonary nil. There were no deaths recorded as due to Pulmonary or Non-pulmonary Tuberculosis.

	1969	1968	1967	1966	1965	1964	1963	1962	1961	1960	1959
No. of cases notified Pulmonary	1	3	-	-	2	4	5	6	4	7	7
No. of cases notified Non Pulmonary	-	1	1	-	-	-	1	3	2	1	2
No. of deaths Pulmonary	-	-	1	-	-	-	1	1	-	1	2
No. of deaths Non Pulmonary	-	1	-	-	-	-	-	-	1	-	-
Death Rate of Respiratory Tuberculosis per 1,000 population	-	-	0.3	-	-	-	.03	.03	-	.03	.08

MATERNITY AND CHILD WELFARE

INFANT WELFARE CLINICS

The establishment and maintenance of the Infant Welfare Clinics are the direct responsibility of the Somerset County Council, and during recent years, the number of such clinics has risen to 7. At each clinic a doctor engaged by the Somerset County Council attends regularly, also a District Nurse. Facilities are available for the purpose of purchasing Infant Welfare Foods, including National Dried Milk, Orange Juice etc. and certain proprietary dried milk preparations, which are sold at the clinics at special prices. Apart from other considerations, the clinics have an important educational value. Associated with each clinic is a voluntary Committee, the value of whose services it would be difficult to over emphasize.

The table shown overleaf sets out the attendances, etc., at the various clinics.

REPORT ON MEDICAL OFFICERS

	PROCTOR	WYCK- STON- HARDON	SCOTCH PETHUR- TON	WEST COKER	FOULD- STONE CAMP	RAK- HILL ROAD	ELCHESPER	TOTAL
No. of children who attend- ed for the first time under 1 year of age ...	54	31	51	14	19	21	80	270
No. of children who attend- ed during the year ...	182	91	165	92	69	64	207	870
Total attendances of child- ren during the year ...	934	658	778	326	148	271	1,064	4,179
Average attendances of children per session ...	39.0	27.0	33.4	27.1	18.5	22.5	46.2	30.5
Total No. of consultations with Medical Officer ...	267	89	238	111	20	50	102	897
No. of medical sessions with Medical Officer ...	24	12	24	12	3	12	23	110
Total No. of sessions	24	24	24	12	8	12	23	127

BIRTHS AND DEATHS OF INFANTS

Live Births	Legitimate 508	Illegitimate 19	Total 527
Stillbirths	" 11	" 1	" 12
Infant Deaths	" 10	" -	" 10

HOME HELP SERVICE

This service continues to render excellant assistance and the following table shows the scope of its activities.

<u>Type of Case</u>					<u>1969</u>	<u>1968</u>
Maternity	...	...	...	...	2	13
Old Age and Infirmary		...	...	...	101	100
Chronic Illness	...	...	...	...	5	11
Mental Health	...	...	...	...	4	-
Child Care	...	...	...	...	1	-
Post-operation	...	...	...	...	-	7
Tuberculosis	...	...	...	...	-	1
Accidents	...	...	...	...	-	2
General Illness	...	...	...	...	1	5
					<u>114</u>	<u>139</u>

NATIONAL ASSISTANCE ACT

No action was taken under Section 47 of the above Act during 1969.

Annual Report of the Chief Public Health Inspector

To the Chairman and Members of the Council's Works and Public Health Committee

I have pleasure in submitting a report on the work of the Public Health Inspector's Department for 1969:-

1. Staff;
2. Agriculture (Safety, Health and Welfare Provisions) Act, 1956;
3. Agricultural Nuisances;
4. Animal Boarding Establishments Act, 1963;
5. Caravan Sites;
6. Cesspool Emptying Service;
7. Civic Amenities Act, 1967;
8. Clean Air Acts 1956 and 1968;
9. Closet Accommodation;
10. Diseases of Animals Act, 1950
Diseases of Animals (Waste Food) Order, 1957;
11. Factories Act, 1961;
12. Food Hygiene (General) Regulations, 1960
and Food and Drugs Act, 1955;
13. Housing Act, 1967;
14. Imported Food Regulations, 1968;
15. Housing - Improvement and Standard Grants;
16. Inspections;
17. Meat Inspection and Slaughterhouses;
18. Milk Supplies - Brucella Abortus;
19. Noise Abatement;
20. Notices served;
21. Offices, Shops and Railway Premises Act, 1963;
22. Petroleum Acts;
23. Poultry Inspection;
24. Refuse Collection and Disposal;
25. Rodent Control;
26. Sewage Disposal;
27. Water Supplies;
28. Appendix I - Factories Act, 1961;
Appendix II - Meat Inspection - Carcases and Offal inspected;

I wish to take this opportunity to acknowledge the considerable assistance which has been received from the Council's Staff of Public Health Inspectors and Miss Marks in the compilation of this report and to the members of the Council for their support during the year.

I have the honour to be
Your obedient Servant,

B. Morris.

1. STAFF:

I am pleased to say that there have been no changes in staff during the year or any substantial change in their duties.

The Staff of the department comprise:

B. Morris,	C.P.H.I.
J. T. Dallimore,	D/C.P.H.I.
W. G. Kelley,	Senior Meat Inspector.
W. A. Barton,	Additional P.H.I.
D. H. DeGroot,	Meat Inspector (Authorised).

2. AGRICULTURAL (SAFETY, HEALTH AND WELFARE PROVISIONS) ACT, 1956:

There were no inspections requested or routine visits made.

3. AGRICULTURAL NUISANCES:

These are becoming more prevalent on a national scale due to the increase in intensive farm practices. In this area there are seven such establishments and three nuisances were notified and remedied informally by the department during the year. In such cases an endeavour is made to advise the occupiers so that a recurrence of the nuisance is avoided.

4. ANIMAL BOARDING ESTABLISHMENTS ACT, 1963:

The number of kennels licensed has been reduced to two. Both premises were inspected in company with an inspector of the R.S.P.C.A. and minor defects remedied.

5. CARAVAN SITES:

	<u>Permanent</u>	<u>Seasonal</u>
(a) Number of single caravans licensed ..	25	-
(b) Number of site licences issued in respect of more than one caravan ..	12	1
(c) Estimated maximum number of occupants resident during year ..	325	-
(d) Number of sites closed ..	Nil	Nil
(e) Camping Sites - Number of unlicensed sites in use ..	-	1

Sites were inspected and five site owners were notified of defects which were remedied informally.

Gypsies - Consultations during year with the S.C.C. officials, with regard to possible sites for Gypsies in this district.

/Continued

6. CESSPOOL EMPTYING SERVICE:

The Council operate a service by contract with a local firm. The administration of the service is by the Engineer and Surveyor's Department.

Four free emptyings a year are given on demand, up to a maximum annual gallonage emptied of 12,000. The Council arrange further emptyings at 37/6d. a time, payable in advance.

7. CIVIC AMENITIES ACT, 1967:

(a) Abandoned vehicles:

Five cars and one motor cycle were removed.

(b) Abandoned refuse:

Three complaints of abandoned refuse were received and two successful prosecutions ensued. It is worth noting that the reception area of Odcombe refuse-tip was again well used by the public.

8. CLEAN AIR ACTS 1956 AND 1968:

(a) One application only was received for prior approval for the erection of a furnace and chimney.

(b) There were several complaints of nuisance arising from the burning of garden refuse. However the numbers of such complaints are reducing and it is thought that the fact that the Council Refuse Collection Service now accepts garden refuse, when put out in reasonable quantities, has helped to diminish these complaints.

9. CLOSET ACCOMMODATION:

Nine properties were provided with water-closets during the year. It is expected that this figure will be substantially increased in 1970 as the Marston Magna, Rimpton and West Camel sewerage scheme is about to come into operation.

10. DISEASES OF ANIMALS ACT, 1950:
DISEASES OF ANIMALS (WASTE FOOD) ORDER, 1957:

There are 6 current licences with an estimated through-put of 7 tons of waste food. Each establishment was inspected at least once.

11. FACTORIES ACT, 1961:

Fourteen visits were made to factories and two informal notices served.

See Appendix I for statistics.

/Continued

12. FOOD HYGIENE (GENERAL) REGULATIONS, 1960
AND FOOD AND DRUGS ACT, 1955:

(a) Classification of premises:

- (i) Catering 22
- General Food 67
- Baker/Confectioner 17
- Licensed Premises 50
- (ii) the number of premises fitted to comply with Regulation 16, 156
- (iii) the number of premises to which Regulation 19 applies, 154
- (iv) the number of premises fitted to comply with Regulation 19, 154

(b) Inspection of premises and vehicles:

- (i) number of premises inspected 121
- (ii) number of vehicles inspected 21
- (iii) visits made specifically to inspect food (including poultry) 64

(c) Food complaints:

Three complaints were received during the year relating to bread, sausage and milk. Each of the complaints was impartially and thoroughly investigated, but legal proceedings were not considered necessary.

(d) Ice Cream Registrations:

Number of premises registered for:-

- (i) Manufacture and retail 1
- (ii) Manufacture only Nil
- (iii) Retail only 114

(e) Ice Cream - Bacteriological Sampling:

- (i) Total number of samples taken 21
- (ii) Results:
 - Grade I 11
 - Grade II 4
 - Grade III 4
 - Grade IV 2

/Continued

13. HOUSING ACT, 1967:

(1) Housing Act 1957 (Section 17 - Individual Unfits)

Number of houses lost:-

(i)	(a)	Houses demolished	6
	(b)	Houses closed	7
(ii)		For other purposes (road improvements etc.)	Nil

(2) Number of houses declared unfit under Section 9 of the Housing Act, 1957 (capable of repair) Nil

(3) Number of houses made fit during year:

(a)	After formal action	11
(b)	After informal action	33

(4) Number of unfit houses occupied under licence Nil

(5) Houses in multiple occupation (Housing Act, 1961) Nil

(6) Substitution of Closing Order for Demolition Order (Housing Act, 1961)
Action taken Nil

14. IMPORTED FOOD REGULATIONS, 1968:

(See details included under Meat Inspection heading).

15. HOUSING:
IMPROVEMENT AND STANDARD GRANTS:

The Housing Act, 1969 came into operation on 1st August, 1969 and made the following three types of house improvement grant available:

(a) Discretionary Grants - for thorough improvements to a high standard or for providing dwellings by conversion, which the Council may pay at their discretion.

In these cases the grant paid may be up to one-half of the estimated cost of modernisation (including professional fees) subject normally to a maximum grant of £1,000 for each house improved (or provided by conversion). The costs allowable for grant may now also include certain works of repair or replacement.

/Continued

HOUSING:IMPROVEMENT AND STANDARD GRANTS (CONCL):

- (b) Standard Grants - for the provision of basic amenities, that is, bath, wash-hand basin, sink, hot and cold water supply and water closet.

The grant is again 50% of the allowable cost up to a normal maximum of £200. Where it is necessary to construct a bathroom and/or to provide a septic tank the maximum can be increased to £450.

- (c) Special Grants - this is a new kind of assistance for the provision of basic amenities for the benefit of houses in multiple occupation payable at the discretion of the Council.

The effect of these improved grants was very marked during the last quarter of the year and the signs are that this momentum is being maintained into 1970.

With the introduction of the new Act the Council have also decided to bring the standards for Discretionary Grants up to those recommended by the Parker Morris Report.

The following is a breakdown of the applications dealt with:-

(A) Improvement Grants(i) Applications

No. of applications received:

	<u>1969</u>	<u>1968</u>
(a) conversions	6	4
(b) general improvements...	17	25
Total	<u>23</u>	<u>29</u>

No. of applications approved:

	<u>1969</u>	<u>1968</u>
(a) owner-occupied houses..	13	19
(b) tenanted houses	10	9
Total	<u>23</u>	<u>28</u>

Total cost of improvement work	£44,771	£40,005
Total amount of grant approved	£13,674	£10,936
An average grant per house was approx.....	£594	£377
National average per house	Not Available	£309

(ii) Payments

No. of grants paid	29	31
Amount paid in grants	£10,943	£13,290
Average grant paid per house	£377	£429

(B) Standard Grants

/Continued

(B) Standard Grants

(i)	<u>Applications</u>	<u>1969</u>	<u>1968</u>
	No. of applications received	13	12
	No. of applications approved:		
	(a) owner-occupied houses ..	12	6
	(b) tenanted houses	1	6
	No. of applications where the Council agreed to give grants in excess of the normal £155 (or after 1st August, 1969, £200) for bathroom additions and/or septic tanks or cesspools ..	6	3
(ii)	<u>Payments</u>		
	Grants paid on completion of improvements:		
	No. of dwellings concerned	11	14
	Total number of grant paid	£1,798	£2,13
	Average per house	£181	£15
	Amenities provided with Standard Grant assistance:-		
	Bathroom additions	1	-
	Fixed bath or shower	11	9
	Wash-hand basin	9	10
	Hot water supply to:		
	(a) three fittings	10	7
	(b) one or two fittings	1	5
	W.C. within the dwelling	10	11
	Septic tank installations	2	3
	Food store	9	9

16. INSPECTIONS: Summary relating to all sections of departments work:

Animal Boarding Establishments	2
Caravans	60
Civic Amenities Act and Litter Act	73
Clean Air Act	20
Diseases of Animals Acts	6
Disinfestations and disinfections	51
Drainage	222
Factories and Outworkers	16
Food Hygiene C/S	5

/Continued

INSPECTIONS (CONCL):

Food Premises:

(a) Bakers and bakeries	8
(b) Shops	42
(c) Cafes and Restaurants	48
(d) Fish and chip/Wet fish shop	2
(e) Licensed premises and Off Licences	20
(f) Sweet confectionery	4
(g) Markets, Stalls and Delivery Vehicles	21
Housing	133
Ice Cream sampling and Registration	35
Improvement Grants	572
Infectious Disease	11
Inspection of food	23
Interviews	34
Meat Inspection	289
Means of Escape in case of fire	2
Milk and Dairies Regulations	1
Miscellaneous	77
Noise Abatement Act	78
Nuisances	176
Offices and Shops Act	62
Petroleum Acts	72
Refuse Collection and Disposal	268
Rodent Control	114
Slaughterhouses	10
Slaughter of Poultry Act 1967 and Inspection of Poultry	44
Water Supplies	38

MEAT INSPECTION AND SLAUGHTERHOUSES:

- (a) Three slaughterhouses were licensed but only two were in regular use and one of these accounted for 99% of the annual kill.

See Appendix II for Carcases and Offal inspected and condemned in whole or in part during the year.

/Continued

17. MEAT INSPECTION AND SLAUGHTERHOUSES (Cont):

(b) Total number of animals slaughtered:

	1969	1968	1967
Cattle (excl. cows)	3,470	4,359	3,153
Cows	28,200	27,547	27,776
Calves	585	1,181	1,852
Sheep and Lambs	20,223	19,720	17,412
Pigs	2,311	1,384	311
	54,789	54,191	50,504

Translated into inspection units the above totals represent:

1967,	350,603 units
1968,	366,195 units
1969,	369,438 units

Throughput was at an even tempo throughout the year with none of the slack periods normally encountered in the meat trade.

- (c) The inspection of (fresh) meat necessitated work on forty-six Saturdays and seventeen Sundays. In addition, work was necessary on two Saturdays and five Sundays for the inspection of imported meat.
- (d) Fifty containers of imported meat were inspected by this Department in lieu of Port Health Inspection. This arrangement is in accordance with the Imported Food Regulations, 1968, and is necessary as a thorough check of all meat in containers is not always possible at ports due to limited dock-side facilities and the need to reduce undue delay to consignments. The imported meat comprised 8,429 forequarters and 46 whole carcasses of beef, and 2,279 boxes of boneless beef. The countries of origin were France, Belgium and Switzerland.
- (e) The Meat (Sterilisation) Regulations 1969 came into operation on 1st November. Briefly, they enable the meat inspector to ensure that any unfit meat which is not sterilised at a slaughterhouse is removed to an approved processor only.
- (f) The percentage of condemnations remained approximately comparable to previous years. In some instances there would appear to have been a deterioration in the standards of acceptance at Markets and it is hoped that the standards will be higher in the future and that this could then lead to a reduction in condemnations.
- (g) The following schedule gives details of the specific diseases and conditions found:

/Continued

	<u>Pigs</u>	<u>Sheep</u>	<u>Adult Cattle</u>	<u>Calves</u>
Abnormal odour associated with disease	1	2	6	1
Acetonaemia			1	
Actinobacillosis			5	
Anaemia (Advanced)			2	
Arthritis - Gangrenous				
Badly bled and Oedemations			3	
Bruising - Severe	1	1	18	
C. Bovis - Generalised		1		
Cystercosis		1		
Dead on Arrival	3			
Decomposition		3	1	
Emaciation, Pathological	2	30	13	
Fevered	24		13	1
Gangrene			16	
Immaturity				
Insufficient bleeding				
Jaundice			1	
Lymphadenoma				
Lymphosarcoma				
Mastitis (Acute septic)			1	
Metritis (Acute septic)		2	5	
Moribund	4	6	21	3
Muscular Degeneration	1		1	
Nephritis - Gangrenous	5			
Oedema (Generalised)	4	22	233	30
Parasitisation - generalised				
Pericarditis (Acute septic)				
Peritonitis (Acute septic)			4	1
Pleurisy (Acute diffuse septic)				
Polyarthrititis	1		3	
Pneumonia - septic		4	1	
- gangrenous			2	1
Pyæmia - umbilical				9
- other	20	8	40	5

/Continued

	<u>Pigs</u>	<u>Sheep</u>	<u>Adult Cattle</u>	<u>Cal</u>
Pyelonephritis	2		8	
Septicaemia	3		58	
Swine Erysipelas (Acute)				
Suffocation				
Toxaemia		3	30	
Tuberculosis				
Tumours			40	1
Uraemia			1	
Xanthosis				

18. MILK SUPPLIES - BRUCELLA ABORTUS:

No samples of raw milk were examined.

19. NOISE ABATEMENT:

Thirty-two visits were made to premises for observation purposes. The principal nuisance was again in connection with a 'chronic' barking dog complaint.

20. NOTICES SERVED:

(a) Caravan Sites and Control of Development Act, 1960:

(i) Site defects	5
(ii) Unauthorised siting	2

(b) Civic Amenities Act, 1967:

(i) Abandoned rubbish	1
(ii) Abandoned vehicles	3

(c) Clean Air Act, 1956:

(i) Smoke nuisance	6
(ii) Chimney heights	

(d) Construction (Health and Welfare) Regulations, 1966

1

(e) Diseases of Animals (Waste Food) Order, 1957:

(f) Factories Act, 1961:

(i) Sanitary conveniences	1
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(g) Food and Drugs Act, 1955:

(i) Unsound food	2
(ii) Foreign bodies in food	2

NOTICES SERVED (CONCL):

(h) Food Hygiene (General) Regulations 1960:	22
(i) Food Hygiene (Markets, Stalls and Delivery Vehicles) Regulations, 1966:	
(j) Housing Act, 1957:	
(i) Houses repairable at reasonable cost	5
(ii) Overcrowding	1
(iii) Contravention of Closing Orders	1
Housing Act, 1969:	
(i) Rents	
(k) Litter Act, 1958:	
(l) Milk and Dairies Regulations, 1959:	
(i) Milk suspected of causing disease (Undulant Fever)	
(m) Noise Abatement Act, 1960:	2
(n) Offices, Shops and Railway Premises Act, 1963:	13

OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963:

No. of premises registered under the Act	85
No. of general inspections	62

There have been no problems in enforcing the provisions of the Act.

The guarding of gravity fed food slicing machinery however needs constant surveillance. It has been found that operatives, on many occasions, have removed carriage guards, claiming that they are an encumbrance.

The ratio of staff to premises and other commitments in the District, enables the frequency cycle of General Inspection to be an eighteen months interval for premises which have been found to be consistently satisfactory, e.g. banks.

A six monthly cycle of inspection is maintained for all food premises. Other classes of premises have, on an average, an annual General Inspection.

Contraventions of a minor nature are dealt with verbally at the time of inspection, more serious matters are dealt with by informal notice. The majority of visits are made without previous notification.

/Continued

21. OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963 (CONCL):

Liason on applications under Planning and Building Regulation legislation provide a source of information on premises which will be coming within the scope of the Act, or are being materially altered whilst subject to the Act.

22. PETROLEUM ACTS:

The administration of matters relative to petroleum storage proceeded without undue incident but unfortunately due to other more pressing commitments it was not possible to inspect all installations during the year. This I consider is an undesirable state of affairs in view of the potential risk which the storage of petroleum entails.

No. of licences issued:

Garages and Filling Stations	35
Farms	33
Industrial users	20
Total	<u>88</u>

23. POULTRY INSPECTION:

(i)	number of poultry processing premises within the district	3
(ii)	number of visits to these premises	44
(iii)	total number of birds processed during the year	4,500
(iv)	types of birds processed - hens, broilers, turkeys	
(v)	percentage of birds rejected as unfit for human consumption	1%
(vi)	weight of poultry condemned as unfit for human consumption	Not known

Spot checks were carried out at both premises and carcasses were chosen for inspection at random.

24. REFUSE COLLECTION AND DISPOSAL

(a) Collection:

It was decided, for financial reasons, to defer for the time being the introduction of a pilot scheme for the use of paper/polythene sacks as bin liners.

/Continued

4. REFUSE COLLECTION AND DISPOSAL (CONCL):

This is a scheme which had been evolved in order to facilitate a back door collection from domestic premises and to make the work of refuse collection more hygienic.

(b) Disposal:

It was found necessary to restrict the use of the present tip for the disposal of trade refuse. The tip is still used for the disposal of liquid wastes arising from some factory premises in the Yeovil Borough area but it will be necessary to withdraw this service some time during 1970.

Negotiations for the purchase of further land at Odcombe for use as a refuse disposal site have been commenced.

(c) Salvage of materials:

A limited salvage of shop waste and newspapers put out in bundles by householders was continued during the year. There was a slight increase in the tonnage recovered but the estimated target was not achieved. This was because the labour available for baling the material was frequently required for refuse collection duties.

During the year the following materials were collected and sold:-

Mixed waste paper	15	17	2	@ £7 per ton
Newspapers in bundles	4	18	3	@ £6 per ton

5. RODENT CONTROL:

The department lost the valued services of Mr. Fred Pipe through retirement in September and he has been replaced by Mr. A. W. Dodge who will also operate on a part-time basis.

Summary of treatments:

PROPERTIES (other than sewers)

	TYPE OF PROPERTY	
	NON AGRIC.	AGRIC.
1. Number of properties in district	9973	258 (new estimate)
2. a) Total number of properties (including nearby properties inspected following notification)	450	13
b) Number infested by (i) rats	394	13
(ii) mice	56	-
3. a) Total number of properties inspected for rats and/or mice for reasons other than notification	645	15
b) Number infested by (i) rats	452	15
(ii) mice	8	-

26. SEWAGE DISPOSAL:

(Information supplied by Mr. P. E. Mitchell, Council's Engineer and Surveyor)

(a) Parishes with main drainage and efficient disposal systems:-

Ash	Mudford
Barwick	North Perrott
Chilthorne Domer	Rimpton
East Chinnock	South Petherton
East Coker	Stoke-sub-Hamdon
Haselbury Plucknett	Tintinhull
Ilchester	West Camel
Marston Magna	West Coker
Martock	Yeovil Without
Montacute	

(b) Works completed during the year:-

	<u>Cost</u> (Approx)
Barwick and Stoford	£70,000
Marston Magna, Rimpton and West Camel	£142,000

27. WATER SUPPLIES:

(i) Mains services:

The Wessex Water Board carried out a programme of mains scraping in an attempt to eliminate the difficulties experienced due to iron-oxide deposits in some old mains.

The villages treated were:

Chiselborough	West Chinnock
East Chinnock	South Petherton
Norton-sub-Hamdon	

Nine bacteriological samples were taken from mains supplies and all were reported to be satisfactory.

(ii) Private supplies:

Seventy scattered properties rely upon well supplies and fifty-one on springs.

Twelve bacteriological samples were taken from these supplies and five were reported as being unsatisfactory.

28. APPENDIX:

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ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH
IN RESPECT OF THE YEAR 1969 FOR THE RURAL DISTRICT COUNCIL
OF YEOVIL IN THE COUNTY OF SOMERSET

Prescribed Particulars on the Administration of
the Factories Act, 1961

1 - INSPECTIONS for purposes of provisions as to health
(including inspections made by Public Health Inspectors)

Premises	Number on Register	Number of		
		Inspection tions	Written notices	Occupiers prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	1	NIL	NIL	NIL
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	85	14	2	NIL
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises)	2	2	1	NIL
Total	88	16	3	NIL

2 - Cases in which DEFECTS were found in connection with Sections 1,
2, 3 and 4 of the Act - NIL

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